PTO/SB06 (08-03)

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U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEF DETERMINATION AT CALL PROPERTY APPLICATION FEED AT CALL PROPERTY APP

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Apple	1 121000	
CLAIMS AS EILED - PART I											
L			otemn 1)		(Column 2)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FÖR		HUM	NUMBER FILED		NUMBER EXTRA		RATE	FEE	1	PAYE	T
ß	ISIC FEE 7 CFR 1,16(a))					1		5	1	RATE	FEE
TOTAL CLAIMS (37 CFR.1.16(c))			minus 20 =			1	x s =		OR		
	DEPENDENT CLA	IMS	minus 3 = 1			1		 	OR	X 5=	
_	MULTIPLE DEPENDENT CLAIM PRESENT (77 CFR 1.16(d))				1	X 5 =		OR	X 1=	 	
]	+\$=		OR	+5=	
" if the difference in column 1 is less than zero, enter "O" in column 2.							TOTAL	L	OR	TOTAL	
CLAIMS AS AMENDED - PART II											
К	123105	(Column 1)		(Column 2)	(Column 3)		SMALL E	SAUTTY	OR	OTHER	
A ·		CLAMS. REMAINING	1	HIGHEST	PRESENT	1			· ·	SMALL	ENTITY
Ę		AFTER AMENOMENT		PREVIOUSLY	EXTRA		RATE	ADDI- TIONAL		RATE .	ADOI-
Ž	· Total	75	Minus -	PARTEOR	. /		x*25	FEE	:		FEE
AMENDMENT	Independent OF CFR 1,1603	1. 7	Minus	- 6			XYOU		OR .	x450	
AME		<u> </u>	_	()/			**100		OR	× 200	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))							+4/80		OR	+:360	
							ADO'L FEE		OR	TOTAL ADD'L FEE	
	·	(Column 1)	_	(Column 2)	(Column 3)					•	
8		CLAINS REMAINING		HIGHEST NUMBER	PRESENT		RATE	ADO).		RATE	400h
EN.		AFTER AMENOMENT	:	PREVIOUSLY PAID FOR	EXTRA .		_ : ; .	TIONAL FEE		·	TIONAL
AMENDMENT	Total profit 1.16(c)	•.	Minus	.	•		,,25		OR	" ED	
Ä	Independent (IF CFR 1.16(c))	<u> </u>	Minus		•		× 1001		OR	X IM	·. •
FRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(4))							7.18Q		OR	1.2/00	
							TOTAL ADD'L FEE			TOTAL	
		(Column 1)		(Column 2)	(Cabina 2)		ישניום נ		OR	ADD'TEE	
ပ		CLAIMS		HIGHEST	(Column 3)	r	`` i		1		
Ę		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY	PRESENT EXTRA	ı	RATE .	ADDI- TIONAL		RATE	ADDI- TIONAL
AMENDMENT	Total GF CFR 1.15(c)	*	Minus	PAID FOR	-	ŀ	- 1	FEE	- 1		PEE
ËN	Independent (SF CFR 1.16(vg)	•	Minus	•••	-	ŀ	76		OR	ו;\\	
¥		ATION OF MARTIPU			PA VEGO	`†	***		QR	~	
		A PARTY IN THE PAR	THE COMME STATE	TOTAL		OR	+ 30C				
* If the entiry in column 1 is less than the entry in column 2 well are the entry in column 2											
	" If the "Highest I	Number Previously	Paid for	IN THIS SPACE	is less than 20.	~~ Histori	20.		•	1	1

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to tata 12 minutes to complete, including pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this turden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.